The Estimated Indemnity Worksheet for the **Accelerated Pseudorabies Eradication Program** Producer Name Address, City, State, Zip Telephone Number Contact Date Enrollment Date **Estimate Date** Acceptance Date **Delivery Date** Market Price on Contact Date Market Price on Delivery Date Weight Mid Point Number of Swine in weight range Market Value per Subtotal by Range Weight (a) Pound during weight range **(b)** (a*b*c)- pounds - pounds contact week (c) 0-50 25 51-100 75 101-150 125 151-200 175 201 plus 225 Breeding 375 Total of Subtotal by Weight Range (f) Number Of Swine in Dollar Cost Offset | Dollar Cost Offset Swine Category (d) as per Contact Date Subtotal by Category Category (e) (d*e) < 201 Pounds >=201 pounds Used for Breeding Total of Dollar Cost Offset Subtotal \$ **(g)** Total Estimate: (f + g)Signature of State or Federal Estimator Date Depopulation Proposal (as per the herd plan): hereby agree that this worksheet is only an estimate of the compensation that I am to receive and that the actual indemnity will be based or ne total weight of my animals and the number of swine in each category on the Date of Delivery. The Dollar Cost Offset per Contact Date f this form will be used to calculate the final Dollar Cost Offset. The value per pound compensation paid will be the greater of the value p ound on the Contact Date or on the Delivery Date.

Date

Producer Signature